Exploring a Decentralized Continuum of Community-Based Services and Care for Los Angeles County

On February 12, 2019, a number of motions were passed which clearly signaled that the County, through this Board of Supervisors (Board), is taking a new direction towards providing innovative leadership on criminal justice reform. The Board took the bold step to reject the Consolidated Correctional Treatment Facility concept as obsolete, in favor of a "care first, jail last" approach based on evidence that demonstrates that punitive environments are not only inhumane for those who are suffering from mental illness, but these environments also exacerbate the illnesses faced by our most vulnerable residents, as well as greatly reduce their likelihood of recovery, upon release.

The Alternatives to Incarceration (ATI) Workgroup was also created on February 12, 2019. In its preliminary report to the Board, presented on June 11, 2019, the ATI Workgroup detailed what a "care first, jail last" model for the County would require. Additionally, on August 7, 2019, the CEO submitted her memorandum (CEO Report), entitled "Report Back On Developing A Care-First Treatment Model For New Mental Health Treatment Center (MHTC)," in response to this Board's directions. Attachment A to the CEO Report is a memorandum from the Health Departments (Health Departments Report), describing three options for right-sizing and scaling of the plan for the MHTC, including creating a decentralized continuum of clinical, trauma-informed care facilities operated by health personnel.

It is a true accomplishment that in only a few months, this County has gone from one understanding of what treatment and justice look like, to a whole new model. This new model prioritizes decentralized services and care, and is based on what we know works best to support our residents and our communities so they can thrive. It is particularly heartening to see the synergistic alignment of these shared principles that is happening through these report-backs, including from the ATI Workgroup and the Health Departments Report. It is also worth noting that these reports also make clear - MORE -

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that there are still significant unknowns in the extent of need for care and services, such as: (a) the number of people who could be diverted based on addiction or medical care needs to a substance abuse treatment or medical care continuum; (b) the number of people we could reasonably expect to be released through properly implemented and bold pretrial reform mechanisms; and (c) the impact of state criminal justice reforms that are likely to continue in the direction that has been advanced in the last decade. Altogether, through these reports, it has become clear that the construction contract that was executed on March 29, 2019 with McCarthy to build a custody facility does not fit this Board's vision for the future of this County.

Moving forward, the demolition of Men's Central Jail must remain at the core of whatever plan is advanced. For the last 60 years, this facility has notoriously defined the landscape of one of the entry points to Downtown LA and the lives of far too many of our County's residents. Additionally, given the extent of the need for treatment for those with mental illness and addiction, including the interrelated needs for housing, education, training, and employment to promote recovery and reintegration, the County must commit to a proper investment in our communities with an understanding of the ongoing necessity for increasing care capacity. Of particular note, as framed in the "Addressing the shortage of Mental Health Beds and Amendment to Item 8" motion, passed on January 22, 2019 (report back pending submission this month), adequate facility-based treatment capacity is foundational to our care continuum and justice reform.

Ensuring adequate capacity requires better and more complete information on which this Board can make better-informed decisions about how to allocate resources. Some efforts to accumulate and study this information are already underway through the County's various bail reform efforts and the February 12, 2019 "Coordinating the Study of Mental Health and Substance Abuse Diversion and Treatment Capacity Across County Agencies to Reimagine Jail Construction," which further coordinates the reports from the "Scaling Up Diversion and Re-Entry Efforts for People with Serious Clinical Needs" motion, the "Expanding Capacity to Better Serve the Health, Well-Being, and Socio-Economic Needs of Los Angeles County's Vulnerable Residents" motion, and the "Addressing the Shortage of Mental Hospital Beds" study. The ATI Workgroup will also provide additional critical information and insights.

However, some gaps in information remain, especially relating to the potential for diversion and prevention resources for people with addiction or serious medical conditions. The recommended system-wide design and impact of these programs on the jail population has yet to be evaluated and optimized.

WE, THEREFORE, MOVE that the Board of Supervisors direct

1) The directors of the Department of Health Services, the Department of Public Health, and the Department of Mental Health to report back in 90 days, with support of an outside consultant as required and in coordination with the Chief Executive Officer and the Department of Public Works, with detailed data on the anticipated

bed/placement types needed in order to account for the decentralized continuum of community-based treatment and residential beds needed to accommodate those who are potentially able to be diverted from the criminal justice system. This should include coordination and assessment of the various reports and studies that exist or are forthcoming that are related to relevant criminal justice reform, diversion, and alternative to incarceration, and system of care studies, workgroups, and other efforts in the County, along with assessments of available data in the addressing the current gaps in knowledge of the extent of need for care and services, and how they may impact potential diversion or prevention efforts.

- 2) The Chief Executive Officer, the Department of Public Works, in collaboration with the Department of Health Services, the Department of Mental Health, and the Department of Public Health, to report back in 120 days on a plan for a) siting the expanded capacity needed for the decentralized continuum of community-based treatment and residential beds noted above, including consideration of acquiring available beds from hospitals, treatment facilities, and other community-based settings, construction siting options for the community-based beds, available County lots, and other potential non-County lots or buildings available for acquisition, including exploration of a partnership with the State of California to use existing State-owned property to support development of community-based systems of care and b) estimated costs (including acquisition, construction, and/or remodeling) and timeline for making such beds/placements available in the quantities required, and c) funding sources, taking into account funding that would have been directed to construction of the MHTC, among other options.
- 3) Direct the Department of Health Services, the Departments of Mental Health, and the Department of Public Health to retain a consultant to develop a detailed plan within 180 days, to be developed in collaboration with the CEO, the District Attorney, the Public Defender, the Alternate Public Defender, Probation Department, the Sheriff's Department, in consultation with the Superior Court, and other relevant departments and stakeholders for options to reduce or eliminate the need to build additional custody capacity while still allowing for the demolition of Men's Central Jail, including recommendations for decompression of the jail population based on the various prevention and diversion studies listed above, the potential to expand diversion beyond mental health populations to populations struggling with addictions as well as the jail's "general population," and other changes to the criminal justice system including those suggested by the Alternatives to Incarceration workgroup.

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